

Alternatively Developed Foreign Language Examination Results School Year 2013-14

School Name: _____

Name of Person Completing Form: _____

Institution Code: 8000000

Contact Person Telephone Number: _____

*Exam Created by _____

Nonpublic schools may use this worksheet to report the number of **alternatively developed foreign language exams administered in lieu of the discontinued Language Regents Exams** in the 2013-14 school year. In the space provided record by grade level, the number of students who took the exam. **Completed forms may be mailed to the above address or faxed to (518) 474-4674.**

	Date of Exam	8 th Grade	9 th Grade	10 th Grade	11 th Grade	12 th Grade	Total Exams
German							
Hebrew							
Greek							
Arabic							
Latin							
French							
Spanish							

I hereby certify that the information reported above is a true representation of the number of **alternatively developed foreign language exams administered in lieu of the discontinued Language Regents Exams** to students in the above named school. I also certify that this school has adhered to all applicable statutes, regulations, requirements and guidelines established for the creation of an **alternative exam** to provide Regents credit.

Original Signature of Chief Administrator

Chief Administrator Name (Please Print)

Date

*Exam must have been reviewed by an acknowledged language expert from a Higher Education Institution, language society, or groups of language instructors from other schools, and deemed to be the equivalent of a Regents Exam. There must be no conflict of interest between the reviewing individual or entity and the test developer.